



**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
PUBLIC HEALTH COMMITTEE  
MONDAY, FEBRUARY 23, 2015**

**SB 855, An Act Concerning Reports Of Nurse Staffing Levels**

My name is James Iacobellis. I am Senior Vice President, Government and Regulatory Affairs at the Connecticut Hospital Association (CHA). I am testifying today concerning **SB 855, An Act concerning Reports Of Nurse Staffing Levels**.

Before commenting on the bill, it's important to point out that Connecticut hospitals treat everyone who comes through their doors 24 hours a day, regardless of ability to pay.

This is a time of unprecedented change in healthcare, and Connecticut hospitals are leading the charge to transform the way care is provided. They are focused on providing safe, accessible, equitable, affordable, patient-centered care for all, and they are finding innovative solutions to integrate and coordinate care to better serve their patients and communities.

Beginning in 2016, SB 855 would require hospitals to submit to the Department of Public Health annual reports on prospective nurse staffing plans and, in 2017, would require: (1) a description of any differences in the prospective nurse staffing plan; (2) the actual staffing plan; and (3) any actions the hospital intends to take to address such differences or adjust staffing levels in future staffing plans.

Utilizing professional clinical judgment, nurses in Connecticut hospitals develop staffing plans using multiple sources of information with a focus on achieving positive patient outcomes. On a daily and hour-to-hour basis, nurses assess patient care needs and consider a wide range of factors, which go beyond numbers and ratios, to make staffing decisions. Some examples include patient-specific factors such as the severity and urgency of a patient's condition, age, cognitive and functional ability, scheduled procedures, and stage of recovery. Staff-specific factors such as licensure, educational preparation, skill level, years of experience, tenure on the patient unit, and level of experience with a particular type of patient care are considered when setting staffing plans. These elements are not captured simply by counting the total number of patients and the total number of staff at any level of care.

Connecticut hospitals' intense work to create organizational cultures of safety and eliminate all preventable harm includes participation in a national collaborative, the Partnership for Patients, which is focused on improving patient care in ten key clinical areas. Nurses are integral to the success of these initiatives, as they work within multidisciplinary teams to prevent care complications and ensure the best patient experience. This is why CHA did not oppose the language that is now found in SB 855 during the last legislative session.

This session, the environment for healthcare providers and specifically hospitals is different. The Governor's proposed budget broadens the hospital tax and makes significant cuts to hospital reimbursement. Hospitals face legislation that makes many hospital facilities subject to property tax, changes the regulatory environment in ways that would impede implementation of healthcare reform, and implements a stifling Department of Social Services audit environment. Additionally, legislation before this Committee would impose significant unfunded mandates and increase unwarranted regulatory burdens.

It is within this environment that we must reconsider SB 855 and the provisions contained therein. We urge the Committee not to take action on SB 855 in isolation, but instead to consider the requirements in light of the various other bills before it and the legislature.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.